COMPLETE THIS SECTION ON DELIVERY SENTER: COMPLETE THIS SECTION A. Signature Complete items 1, 2, and 3. Also complete ☐ Agent item 4 if Restricted Delivery is desired. Print your name and address on the reverse ☐ Addressee so that we can return the card to you. B. Received by (Printed-Name) C. Date of Delivery Attach this card to the back of the mailpiece, 7-27-06 ENNAS or on the front if space permits. ☐ Yes D. Is delivery address different from item 1? 1. Article Addressed to: □ No If YES, enter delivery address below: DAVID PENNY 2400 EAST 20 SOUTH P O BOX 312 **BEAVER UTAH 84713-0312** 3. Service Type ☐ Certified Mail ☐ Express Mail ☐ Return Receipt for Merchandise □ Registered ☐ Insured Mail TCOD. 4. Restricted Delivery? (Extra Fee) ☐ Yes 2. A Number 7004 2510 0004 1824 7777 r from service label) PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-1540

Sender: Please print your name, address, and ZIP+4 in this box

VICKIE SOUTHWICK DIVISION OF OIL GAS AND MINING 1594 WEST NORTH TEMPLE SUTIE 1210 SALT LAKE CITY UTAH 84114 JUL 3 1 2006 OF OIL GAS & MININ

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U.S. Postal Service™ CERTIFIED MAIL™ RE©EIPT

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2400 EAST 20 SOUTH P O BOX 312 **BEAVER UTAH 84713-0312**

PS Form 3800, June 2002

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